

State of California

Respiratory Care Board

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Inquiry: I am asking for a ruling regarding the practice of pulseoximetry performed by Medical Assistants on outpatients in the hospital setting for the purpose of qualifying or recertifying patients for home oxygen. Specifically, if the respiratory care practitioners are busy with inpatients and an outpatient arrives to the department with an order for pulseoximetry, is it acceptable for the department's Medical Assistant (who schedules the outpatient's appointments) to perform the pulseoximetry test? I am aware that Medical Assistants perform pulseoximetry routinely in physicians' offices. I just want to clarify if this is appropriate in the outpatient hospital setting as well.

Another issue I would like you to address is the fact that Medicare now requires three measurements of oxygen saturation when trying to qualify a patient for home oxygen using the exercise testing criteria. This criteria states that a patient's oxygen saturation must be measured: (1) at rest without oxygen (2) with exercise, but without oxygen, to demonstrate hypoxemia (3) with exercise, with oxygen applied, to demonstrate improvement of the hypoxemia.

My additional question is: Is it acceptable for a Medical Assistant to place an outpatient on oxygen (per criteria 3 above) to demonstrate the improvement of the hypoxemia via pulseoximetry? A protocol approved by the Medical Staff/ and or Medical Director would be in place specifying that Medical Assistants could perform pulseoximetry on their outpatients. Again, I am aware that Medical Assistants occasionally place patients on oxygen in physician's offices. I just want to clarify if this practice is appropriate in the hospital outpatient setting as well.

In our review of the laws and regulations governing medical assistants and additional information provided by the Medical Board of California (enclosed), we offer the following:

Response:

Question

Can a medical assistant practice pulse oximetry in the "outpatient" setting of a hospital?

In our review of the laws and regulations governing medical assistants, we did not find where it is permissible for a medical assistant to perform pulse oximetry. Whereas, section 3702 of the Business and Professions Code permits this practice by licensed respiratory care professionals who are highly educated and trained in the therapy, management, rehabilitation, and diagnostic evaluation of the pulmonary system and associated aspects of cardiopulmonary and other systems functions. Licensed professionals, such as respiratory care practitioners are educated and trained to ensure patient safety by providing accurate results and identifying hazards and complications, that if not recognized could result in patient harm.

Please note the following laws and regulations governing medical assistants as it relates to this issue:

Pursuant to section 2069 of the Business and Professions Code, "'Medical Assistant' means a person who may be unlicensed, who performs basic administrative, clerical, and *technical* supportive services upon the specific authorization and supervision of a licensed physician and surgeon or a licensed podiatrist 1...."

Pursuant to Section 2071 of the Business and Profession Code, "The Division of Licensing [Medical Board of California] shall adopt and administer regulations that establish standards for technical supportive services that may be performed by a medical assistant. . . . "

Pursuant to subdivision (b) of section 1366 of the California Code of Regulations, "A medical assistant. . . may perform additional technical supportive services such as the following:

- (1) Administer medication. . . .
- (2) Perform electrocardiogram, electroencephalogram, or plethysmography tests, except full body plethysmography.
- (3) Apply and remove bandages and dressings; apply orthopedic appliances such as knee immobilizers, envelope slings, orthotics, and similar devices; remove casts, splints and other external devices; obtain impressions for orthotics, padding and custom molded shoes; select and adjust crutches to patient; and instruct patient in proper use of crutches.
- (4) Remove sutures or staples from superficial incisions or laceration.
- (5) Perform ear lavage to remove impacted cerumen.
- (6) Collect by non-invasive techniques, and preserve specimens for testing, including urine, sputum, semen and stool.
- (7) Assist patients in ambulation and transfers.
- (8) Prepare patients for and assist the physician, podiatrist, physician assistant or registered nurse in examinations or procedures including positioning, draping, shaving and disinfecting treatment sites; prepare a patient for gait analysis testing.
- (9) As authorized by a physician or podiatrist, provide patient information and instructions.
- (10) Collect and record patient data including height, weight, temperature, pulse, respiration rate and blood pressure, and basic information about the presenting and previous conditions.
- (11) Perform simple laboratory and screening tests customarily performed in a medical office.
- (12) Cut the nails of otherwise healthy patients. . . . "

In an article published by the Medical Board of California titled, "Is your Medical Assistant Practicing Beyond His or Her Scope of Training" it is noted that:

"...An unlicensed person may not diagnose or treat or perform any task that is invasive or requires assessment. . . .

¹ Medical Assistants practicing in the "outpatient" setting for a medical corporation or health care service plan may perform certain technical supportive services upon the specific authorization and supervision of licensed physician and surgeon or a licensed podiatrist.

[&]quot;Specific Authorization" is defined as "a specific written order prepared by the supervising physician and surgeon or the supervising podiatrist...authorizing the procedures to be performed on a patient, which shall be placed in the patient's medical record, or a standing order prepared by the supervising physician and surgeon or the supervising podiatrist... authorizing the procedures to be performed, the duration of which shall be consistent with accepted medical practice. A notation of the standing order shall be placed on the patient's medical record."

[&]quot;Supervision" is defined as "the supervision of procedures authorized by this section by the following practitioners, within the scope of their respective practices, who shall be physically present in the treatment facility during the performance of those procedures:

(A) A licensed physician and surgeon (B) A licensed podiatrist...."

Medical assistants are not licensed, and it is not legal to use them to replace highly trained, licensed professionals. The medical assistant is present to assist and perform support services in the physician's office.

Those duties must be appropriate with the medical assistant's required training, which cannot be compared with licensed nurses or other health professionals who meet rigorous educational and examination requirements."

Question

Is it acceptable for a medical assistant to place an outpatient on oxygen per the following criteria you provided, to demonstrate the improvement of the hypoxemia via pulse oximetry? "This criteria states that a patient's oxygen saturation must be measured: (1) at rest without oxygen (2) with exercise, but without oxygen, to demonstrate hypoxemia (3) with exercise, with oxygen applied, to demonstrate improvement of the hypoxemia."

Response

Referencing the same information provided in the response above, in our review of the laws and regulations governing medical assistants, we did not find where it is permissible for a medical assistant to measure oxygen saturation nor administer oxygen. Furthermore, the criteria you provided are a series of tests that require a highly trained and educated professional to perform in order to ensure accurate results and patient safety. This criteria as you have described, require several assessments to which a medical assistant "may not diagnose or treat or perform any task that is invasive or requires assessment." Licensed professionals, such as respiratory care practitioners are educated and trained to ensure accurate results, which are dependent upon assessments. Respiratory care practitioners are also trained and educated to recognize hazards and complications which, if unnoticed, could result in serious patient harm.

Enclosed are all applicable laws and regulations (as of June 2003) surrounding medical assistants as well as the Respiratory Care Practice Act. You may also find more information regarding medical assistants at the Medical Board of California's website at http://www.medbd.ca.gov/Medical_ass.htm or by telephoning their office at (916) 263-2382.

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